HHH III

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

Application or Docket Number

09/654801

CLAIMS AS FILED - PART I

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)
BASIC FEE		
TOTAL CLAIMS	153 minus 20=	* 133
INDEPENDENT CLAIMS	8 minus 3 =	* 5
MULTIPLE DEPENDENT CLAIM PRESENT		N

SMALL ENTITY TYPE		OTHER THAN SMALL ENTITY	
RATE	FEE	RATE	FEE
	345.00	OR	690.00
X$ 9=		OR X$18=	2394
X39=		OR X78=	390
+130=		OR +260=	—
TOTAL		OR TOTAL	3474

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X$ 9=		OR X$18=	
X39=		OR X78=	
+130=		OR +260=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X$ 9=		OR X$18=	
X39=		OR X78=	
+130=		OR +260=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X$ 9=		OR X$18=	
X39=		OR X78=	
+130=		OR +260=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER ___09/654801___

Total Fee Calculation

Factor	Fee	Number Filed	Number Extra	Rate	Fee
Basic Filing Fee				690-	690-
Total Claims >20		153	33	18-	2394-
Indep. Total Claims >3		8	5	28-	390-
Multi-Dep Claim Present					
Surcharge				130-	130-
English Translation					
					3604.00

TOTAL FEE CALCULATION

Fees due upon filing this application

Total Filing Fees Due   ; ___3,604.00___

Less Filing Fees Submitted ; ___0___

BALANCE DUE   =$ ___3,604.00___

[signature]
Office of Initial Patent Examination

Figure 7